

Section 232/223(a)(7)

Firm Application Checklist

Firm Application Checklist

Section 232/223(a)(7)

U.S. Department of Housing
and Urban Development
Office of Healthcare Programs

OMB Approval No. 9999-9999
(exp. mm/dd/yyyy)

Public reporting burden for this collection of information is estimated to average 1 hour. This includes the time for collecting, reviewing, and reporting the data. The information is being collected to obtain the supportive documentation which must be submitted to HUD for approval, and is necessary to ensure that viable projects are developed and maintained. The Department will use this information to determine if properties meet HUD requirements with respect to development, operation and/or asset management, as well as ensuring the continued marketability of the properties. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number. No confidentiality is assured.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Project Name: _____

Project Number: _____

SUBMISSION REQUIREMENTS:

- Send one electronic (CD, flash drive, etc.) copy of all the documents identified in the table below to the assigned OHP staff member identified by HUD in Email Blast for receipt of the Firm Application submission.
- OHP will email you with the instructions for sending hard copies.

No.	Item	N/A	Incl.
1.	A. Check ¹ – FHA Application Fee (0.3% of Mortgage Amount)		<input type="checkbox"/>
	B. Check Transmittal Letter		<input type="checkbox"/>
	C. Completed Firm Application Checklist		<input type="checkbox"/>
	C.D. Certification for Electronic Submittal Document		<input type="checkbox"/>
2.	Lender's Underwriting Narrative ² (including applicable addenda) <u>(Submit electronic version as a pdf and as a Word document)</u>		<input type="checkbox"/>
3.	HUD Underwriting Forms		
	A. HUD-92264-A, Supplement to Project Analysis		<input type="checkbox"/>
	• Format for Computing Fees in a Refinance Transaction		<input type="checkbox"/>
	• HUD-92438, Underwriting Summary Report		<input type="checkbox"/>
4.	Firm Commitment (DRAFT)*		<input type="checkbox"/>
	A. Exhibit A, Legal Description		<input type="checkbox"/>
	B. Exhibit B, List of Required Repairs and Associated Costs (if applicable)		<input type="checkbox"/>
	C. Exhibit C, Revised Replacement Reserve Schedule (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
	* Please ensure that you have submitted a copy of the Firm Commitment, with all exhibits, in Microsoft Word.		<input type="checkbox"/>
5.	Lender's Consolidated Certification		<input type="checkbox"/>
6.	Contact List		<input type="checkbox"/>
7.	Copies of any email guidance provided by HUD on this project before the submittal	<input type="checkbox"/>	<input type="checkbox"/>
7-8.	Waiver Requests (use form HUD-2, Request for Waiver of Housing Directive)	<input type="checkbox"/>	<input type="checkbox"/>

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No.	Item	N/A	Incl.
8.9.	Project Capital Needs Assessment, <u>(PCNA)</u> , limited scope ³ (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
	<u>OR</u>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Lender Site Visit – only required if no PCNA is submitted. The following information regarding the Lender Site Visit should be included in the Lender Narrative:</u>		
	<u>A. Date of visit</u>		
	<u>B. Name of the lender representative who went on-site</u>		
	<u>C. Provide the lender representative's qualifications – he or she should be an underwriter, appraiser, or construction specialist</u>		
	<u>D. Describe the property's general condition</u>		
	<u>E. Confirm compliance with state and/or local requirements/codes</u>		
	<u>F. Confirm that REAC deficiencies from the latest inspection have been addressed.</u>		
	<u>It is recommended that the REAC report be used to ensure that deficiencies have been corrected.</u>		
	<u>G. Name(s) of the individual(s) with whom the lender representative met with on site (e.g., project administrator, etc.)</u>		
	<u>A-H. General photographs are welcome (Optional)</u>		
9.10.	Draft Form HUD-4128 <u>or Phase I Environmental Site Assessment</u> ⁴ (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
10.11	Organizational Chart - Mortgagor		<input type="checkbox"/>
11.12	Mortgagor Organizational Documents ⁵		
	A. Corporate	<input type="checkbox"/>	<input type="checkbox"/>
	1. Articles of Incorporation		<input type="checkbox"/>
	2. Bylaws		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	B. Partnership	<input type="checkbox"/>	<input type="checkbox"/>
	1. Partnership Agreement		<input type="checkbox"/>
	2. Certificate of Partnership		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	C. Limited Liability Company	<input type="checkbox"/>	<input type="checkbox"/>
	1. Articles of Organization		<input type="checkbox"/>
	2. Operating Agreement		<input type="checkbox"/>
	1. Authorizing Resolutions		<input type="checkbox"/>
	D. Certification of Good Standing		<input type="checkbox"/>
12.13	Mortgagor's Consolidated Certification		<input type="checkbox"/>
13.14	Principal of Mortgagor's Organizational Documents ^{5/6}		
	A. Corporate	<input type="checkbox"/>	<input type="checkbox"/>
	1. Articles of Incorporation		<input type="checkbox"/>
	2. Bylaws		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	B. Partnership	<input type="checkbox"/>	<input type="checkbox"/>
	1. Partnership Agreement		<input type="checkbox"/>
	2. Certificate of Partnership		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	C. Limited Liability Company	<input type="checkbox"/>	<input type="checkbox"/>
	2. Articles of Organization		<input type="checkbox"/>
	3. Operating Agreement		<input type="checkbox"/>
	4. Authorizing Resolutions		<input type="checkbox"/>
	D. Certification of Good Standing		<input type="checkbox"/>
14.15	Operator's Organizational Documents ⁵		

No.	Item	N/A	Incl.
	A. Corporate	<input type="checkbox"/>	<input type="checkbox"/>
	1. Articles of Incorporation		<input type="checkbox"/>
	2. Bylaws		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	B. Partnership	<input type="checkbox"/>	<input type="checkbox"/>
	1. Partnership Agreement		<input type="checkbox"/>
	2. Certificate of Partnership		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	C. Limited Liability Company	<input type="checkbox"/>	<input type="checkbox"/>
	1. Articles of Organization		<input type="checkbox"/>
	2. Operating Agreement		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	D. Certification of Good Standing		<input type="checkbox"/>
15.16	A. Operating Lease <u>with HUD Addendum</u> (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
	B. Memorandum of Lease	<input type="checkbox"/>	<input type="checkbox"/>
	C. Subordination, Non-Disturbance & Attornment Agreement (SNDA) (if applicable for non-related owner and operator)	<input type="checkbox"/>	<input type="checkbox"/>
	D. Estoppel Certification	<input type="checkbox"/>	<input type="checkbox"/>
16.17	<u>Management Agreement</u> ⁷ Master Lease Documents (if applicable) ⁸	<input type="checkbox"/>	<input type="checkbox"/>
	A. Master Lease (<u>with HUD Addendum</u>)	<input type="checkbox"/>	<input type="checkbox"/>
	B. Sublease	<input type="checkbox"/>	<input type="checkbox"/>
	C. HUD Master Lease Subordination, Non-Disturbance & Attornment Agreement (SNDA) or Subordination Agreement	<input type="checkbox"/>	<input type="checkbox"/>
18.	<u>Management Agreement</u> ⁹ (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
17.19	A. HUD Prepayment Approval from OHCF <u>FOHP</u> ¹⁰		<input type="checkbox"/>
	B. Verification of balances:		<input type="checkbox"/>
	1. A statement reflecting the balance in all existing escrow accounts including replacement reserves – to include a certification from Mortgagor and Current Lender that the balances are true and correct.		<input type="checkbox"/>
	2. Mortgage loan escrow status report as well as the latest monthly mortgage statement showing monthly deposit to Replacement Reserves		<input type="checkbox"/>
	C. Verification of the existing insured mortgage debts and other secured debt of the mortgagor, including references to any prepayment penalties ¹¹		<input type="checkbox"/>
18.20	Current Facility License		<input type="checkbox"/>
19.21	Title		<input type="checkbox"/>
	A. Preliminary Title Report		<input type="checkbox"/>
	B. Pro Forma – 2006 ALTA Title Insurance Policy		<input type="checkbox"/>
	1. ALTA Form Environmental Endorsement		<input type="checkbox"/>
	2. ALTA Form Comprehensive Endorsement		<input type="checkbox"/>
	3. ALTA Form Endorsement deleting Arbitration Clause		<input type="checkbox"/>
	4. ALTA Location of Improvements Endorsement		<input type="checkbox"/>
	C. Exception Documents		<input type="checkbox"/>
	D. Title Policy from original insured transaction(s), if available	<input type="checkbox"/>	<input type="checkbox"/>
20.22	ALTA/ACSM Land Title Survey (see <u>Loan Survey Instructions</u> & <u>Owner's Certification</u> for applicability)	<input type="checkbox"/>	<input type="checkbox"/>
24.23	Evidence of compliance ¹²		<input type="checkbox"/>
	A. Zoning		<input type="checkbox"/>
	B. Building Codes		<input type="checkbox"/>
	C. Verification of Zoning and Code Variances (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>

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No.	Item	N/A	Incl.
22-24	Financial Statements for Operation ¹³ – (12 months) ¹⁴		
	A. Balance Sheet		<input type="checkbox"/>
	B. Income and Expense Statement		<input type="checkbox"/>
	C. Financial Statement Certification		<input type="checkbox"/>
23-25	Documents from State regarding refinance, (if applicable)	<input type="checkbox"/>	
	A. Letter from the State which addresses whether the State will recognize property repairs as capital improvements for reimbursement purposes.	<input type="checkbox"/>	<input type="checkbox"/>
	B. State's computation of capital reimbursement based on old allowable interest expense and old amortization of loan costs vs. new allowable interest expense and new amortization of loan costs.	<input type="checkbox"/>	<input type="checkbox"/>
26.	<u>Grant and/or Secondary Financing Loan Documents</u>	<input type="checkbox"/>	<input type="checkbox"/>
27.	<u>Land Lease (Ground Lease) including HUD requirements/provisions outlined in FHA Form 2070 (if applicable)</u>	<input type="checkbox"/>	<input type="checkbox"/>
28.	<u>Professional Liability Insurance^{15,2}; ACORD Certificate of Liability Insurance</u>		<input type="checkbox"/>
24,29	Professional Liability Insurance ¹⁵ ; Schedule of Facilities Covered by Policy.		<input type="checkbox"/>
25,30	Professional Liability Insurance ^{15,2} ; Loss history		<input type="checkbox"/>
26,31	Professional Liability Insurance ¹³ ; Insurance ¹² ; Potential claims certification		<input type="checkbox"/>
27,32	Professional Liability Insurance ¹⁵ ; Evidence of current cost		<input type="checkbox"/>
28,33	Professional Liability Insurance ^{15,2} ; Evidence of Insurer's Rating		<input type="checkbox"/>
34.	<u>Evidence of Fidelity Bond Coverage</u>		
35.	<u>Other-</u>	<input type="checkbox"/>	<input type="checkbox"/>

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Supplemental Checklists

Check all those that apply:

<input type="checkbox"/>	Principal of the Mortgagor	<i>Ownership change; principal not previously approved by HUD.</i>	Formatted Table
<input type="checkbox"/>	Operator	<i>Operator change, not previously approved by HUD.</i>	
<input type="checkbox"/>	Parent of the Operator	<i>Operator change, not previously approved by HUD.</i>	
<input type="checkbox"/>	Management Agent	<i>Management Agent change, not previously approved by HUD.</i>	
<input type="checkbox"/>	Accounts Receivable Financing	<i>Project's Accounts Receivables are financed.</i>	

End Notes

- 1 - Please have check include reference to project name, location, mortgagee number, and purpose – FHA application fee.
- 2 - Lender shall not make any alterations to the narrative format. If a particular section does not apply within the narrative, it should specifically be noted as NOT APPLICABLE.
- 3 - A Limited Scope PCNA complying with LEAN Guidelines is required on any 223(a)(7) when either of the following is the case at the time of the Section 223(a)(7) application is submitted to HUD: (a) a term extension is being requested; and, (b) a PCNA or comparable reserve analysis has not been submitted to HUD in the previous 10 years.
- ~~4 - A draft from HUD-4128 is only required if proposed repairs will increase building footprint(s) or impervious surfaces.4 - A draft Form HUD-4128 should be submitted if the facility has completed a building addition without having obtained HUD's approval. A Phase I Environmental Site Assessment should be submitted if the facility has acquired land that was not insured under the original mortgage and the facility has yet to receive HUD's approval of the additional land. A draft Form HUD-4128 may also be submitted with the Phase I Environmental Site Assessment if the lender chooses.~~
- 5 - Organizational Documents must be updated to conform to current HUD requirements.
- 6 - Only required for organizations in the Mortgagor entity's signature block.
- ~~7 - See Footnote 1 of Supplemental Checklist D for Management Agents for applicability.~~
- ~~8 - A Master Lease is required for all Mid-Sized and Large-Sized portfolios and for small portfolios with three or more properties and/or \$15 million or more in aggregate mortgage amount.~~
- ~~9 - See Footnote 1 of Supplemental Checklist D for Management Agents for applicability.~~
- 10 - Prepayment approval must be obtained from HUD prior to submission of the application.
- 11 - Appropriate verification may include a current mortgage statement or a payoff letter on the current lenders letterhead and signed by an appropriate officer.
- ~~12 - Lender can use attached sample format for zoning and building code compliance. Responses should be on letterhead of the local jurisdiction and signed by an individual with appropriate authority to do so, such as a Chief Planner~~
- 13 - Operating Financial Statements provided here should pertain only to the operation of the subject facility.
- 14 - Financial statements should cover a minimum operating period of 12 months and have an ending date within 3 months of the application submission date.
- 15 - Professional liability insurance documentation requirements only apply to the insured party providing the coverage and exclude additional named insured parties.

Supplemental Checklist A: Principal of Mortgagor		
<i>This supplemental checklist is applicable when there has been a change, or a change is proposed, in the principal ownership of the Mortgagor entity. These exhibits must be provided for each new or existing principal that has not been previously approved by HUD for participation in this property.</i>		
A-1.	Organizational Chart (if applicable)	<input type="checkbox"/> <input type="checkbox"/>
A-2.	Organizational Documents (if applicable)	
	A. Corporate	<input type="checkbox"/> <input type="checkbox"/>
	1. Articles of Incorporation	<input type="checkbox"/>
	2. Bylaws	<input type="checkbox"/>
	3. Authorizing Resolutions	<input type="checkbox"/>
	B. Partnership	<input type="checkbox"/> <input type="checkbox"/>
	1. Partnership Agreement	<input type="checkbox"/>
	2. Certificate of Partnership	<input type="checkbox"/>
	3. Authorizing Resolutions	<input type="checkbox"/>
	C. Limited Liability Company	<input type="checkbox"/> <input type="checkbox"/>
	1. Articles of Organization	<input type="checkbox"/>
	2. Operating Agreement	<input type="checkbox"/>
	3. Authorizing Resolutions	<input type="checkbox"/>
A-3.	Resume <u>Resume / Evidence that individual or entity is qualified</u>	<input type="checkbox"/> <input type="checkbox"/>
A-4.	APPS Certification 2530/APPS:	
	A. Paper 2530:	
	1. Completed Paper HUD-2530 (with documentation for signature authority to sign for the entity & if applicable, with documentation for signature authority to sign for other principals with same participation)	<input type="checkbox"/> <input type="checkbox"/>
	2. Evidence of registration in HUD's Business Partners Registration System – required for all applicable participants. (http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)	<input type="checkbox"/> <input type="checkbox"/>
	OR	
	B. APPS Submittal: APPS Certification (with documentation for signature authority to sign for the entity & if applicable, with documentation for signature authority to sign for other principals with same participation)	<input type="checkbox"/> <input type="checkbox"/>
A-5.	Principal of Mortgagor Consolidated Certification	<input type="checkbox"/> <input type="checkbox"/>
A-6.	Credit Report	<input type="checkbox"/> <input type="checkbox"/>
	A. Principal of Mortgagor ¹	<input type="checkbox"/> <input type="checkbox"/>
	B. Sampling of Principal's Other Business Concerns	<input type="checkbox"/> <input type="checkbox"/>

1 - If a principal is a business entity (i.e. corporation, partnership) with an operating history, a credit report will be required only on the business firm, not the owners of the firm.

This supplemental checklist is applicable when a change in Operator has occurred or is proposed and the Operator has not been previously approved by HUD for the subject property. Follow Section 223(f) guidelines for further guidance.

B-1.	Organizational Chart		<input type="checkbox"/>
B-2.	<u>Intentionally omitted</u>		<input type="checkbox"/>
B-3.	A. Résumé A. Résumé / Evidence that individual or entity is qualified A-B. Schedule of Facilities Owned, Operated or Managed		<input type="checkbox"/> <input type="checkbox"/>
B-4.	APPS Certification ² /APPS: A. Paper 2530: <u>1. Completed Paper HUD-2530 (with documentation for signature authority to sign for the entity & if applicable, with documentation for signature authority to sign for other principals with same participation)</u> <u>2. Evidence of registration in HUD's Business Partners Registration System – required for all applicable participants.</u> (http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm) OR B. APPS Submittal: APPS Certification (with documentation for signature authority to sign for the entity & if applicable, with documentation for signature authority to sign for other principals with same participation)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
B-5.	Operator's Consolidated Certification		<input type="checkbox"/>
B-6.	Credit Report A. Operator (Lessee) B. Sampling of Operator's Other Business Concerns C. Senior officers of the operator B-D. Any stockholder with a 25 percent or more interest in the operator	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
B-7.	Financial Statements – Year-to-Date ¹ A. Balance Sheet 1. Aging of Accounts Receivable 2. Aging of Notes Receivable 3. Schedule of Pledged Assets 4. Schedule of Marketable Securities 5. Schedule of Accounts Payable 6. Schedule of Notes and Mortgages Payable 7. Schedule of Legal Proceedings B. Income and Expense Statement C. Financial Statement Certification ²	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
B-8.	Financial Statements – FY 2008 ³ / 20XX ³ A. Balance Sheet 1. Aging of Accounts Receivable 2. Aging of Notes Receivable 3. Schedule of Pledged Assets 4. Schedule of Marketable Securities 5. Schedule of Accounts Payable 6. Schedule of Notes and Mortgages Payable 7. Schedule of Legal Proceedings B. Income and Expense Statement C. Financial Statement Certification ²	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
B-9.	Financial Statements – FY 2007 ³ / 20XX ³	<input type="checkbox"/>	<input type="checkbox"/>

- 1 - Year-to-date statements: No more than 3 months can have expired since the closing date of the latest unaudited statement. No more than 6 months can have passed since the statements were audited by a CPA/IPA.
- 2 - Audited financial statements are preferred but owner-prepared statements will be accepted. All financial statements, audited and owner-prepared, will need to be certified by the entity with signature authority for that financial statement.
- 3 - Business entities must submit this exhibit for the lesser of the last 3 years or the length of existence.

This supplemental checklist is applicable when a change in Operator has occurred or is proposed and the Operator has not been previously approved by HUD for the subject property. Follow Section 223(f) guidelines for further guidance.

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	1. Aging of Accounts Receivable	<input type="checkbox"/>	<input type="checkbox"/>
	2. Aging of Notes Receivable	<input type="checkbox"/>	<input type="checkbox"/>
	3. Schedule of Pledged Assets	<input type="checkbox"/>	<input type="checkbox"/>
	4. Schedule of Marketable Securities	<input type="checkbox"/>	<input type="checkbox"/>
	5. Schedule of Accounts Payable	<input type="checkbox"/>	<input type="checkbox"/>
	6. Schedule of Notes and Mortgages Payable	<input type="checkbox"/>	<input type="checkbox"/>
	7. Schedule of Legal Proceedings	<input type="checkbox"/>	<input type="checkbox"/>
	B. Income and Expense Statement		<input type="checkbox"/>
	C. Financial Statement Certification ²		<input type="checkbox"/>
C-10.	Financial Statements – FY 2006 ⁴ <u>20XX</u> ³	<input type="checkbox"/>	
	A. Balance Sheet		<input type="checkbox"/>
	1. Aging of Accounts Receivable	<input type="checkbox"/>	<input type="checkbox"/>
	2. Aging of Notes Receivable	<input type="checkbox"/>	<input type="checkbox"/>
	3. Schedule of Pledged Assets	<input type="checkbox"/>	<input type="checkbox"/>
	4. Schedule of Marketable Securities	<input type="checkbox"/>	<input type="checkbox"/>
	5. Schedule of Accounts Payable	<input type="checkbox"/>	<input type="checkbox"/>
	6. Schedule of Notes and Mortgages Payable	<input type="checkbox"/>	<input type="checkbox"/>
	7. Schedule of Legal Proceedings	<input type="checkbox"/>	<input type="checkbox"/>
	B. Income and Expense Statement		<input type="checkbox"/>
	C. Financial Statement Certification ²		<input type="checkbox"/>

1 - Year-to-date statements: No more than 3 months can have expired since the closing date of the latest unaudited statement. No more than 6 months can have passed since the statements were audited by a CPA/IPA.

2 - Audited financial statements are preferred but owner-prepared statements will be accepted. All financial statements, audited and owner-prepared, will need to be certified by the entity with signature authority for that financial statement.

3 - Business entities must submit this exhibit for the lesser of the last 3 years or the length of existence.

Supplemental Checklist D: Management Agent

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This supplemental checklist is applicable when a change in Management Agent has occurred or is proposed and the Management Agent has not been previously approved by HUD for the subject property. Follow Section 223(f) guidelines for further guidance.

D-1.	Organizational Chart (if applicable – per footnote to this entire section)	<input type="checkbox"/>	<input type="checkbox"/>
D-2.	Organizational Documents (if applicable – per footnote to this entire section)		
	A. Corporate	<input type="checkbox"/>	
	1. Articles of Incorporation		<input type="checkbox"/>
	2. Bylaws		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	B. Partnership	<input type="checkbox"/>	
	1. Partnership Agreement		<input type="checkbox"/>
	2. Certificate of Partnership		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
	C. Limited Liability Company	<input type="checkbox"/>	
	1. Articles of Organization		<input type="checkbox"/>
	2. Operating Agreement		<input type="checkbox"/>
	3. Authorizing Resolutions		<input type="checkbox"/>
D-3.	HUD Management Certification Form (if applicable – per footnote to this entire section)	<input type="checkbox"/>	<input type="checkbox"/>
D-4.	A. Résumé / Evidence that individual or entity is qualified		<input type="checkbox"/>
	B. Schedule of Facilities Owned, Operated or Managed		<input type="checkbox"/>
D-3.	HUD Management Forms		
	A. HUD 9832, Management Entity Profile		
	B. Certifications		
	1. HUD 9839 A, Project Owner's Certification for Owner-Managed ... Projects	<input type="checkbox"/>	<input type="checkbox"/>
	2. HUD 9839 B, Project Owner's/Management Agent's Certification for ... Identity of Interest or Independent Management Agents		<input type="checkbox"/>
	HUD 9839 C, Project Owner's/Borrower's Certification for Elderly Housing Projects Managed by Administrators	<input type="checkbox"/>	
	2530/APPS:		
	A. Paper 2530:		
	1. Completed Paper HUD-2530 (with documentation for signature authority to sign for the entity & if applicable, with documentation for signature authority to sign for other principals with same participation)	<input type="checkbox"/>	<input type="checkbox"/>
	2. Evidence of registration in HUD's Business Partners Registration System –	<input type="checkbox"/>	<input type="checkbox"/>

1- See Matrix below to determine which items in this Section need to be provided with the application:

Scenario #	Description of Participant Roles	Note	Checklist Items to complete
1	Mortgagor is Owner/Operator. One entity		D3
2	Mortgagor has a Management Agent		All of D
3	Mortgagor owns building and land, and leases to Operator who holds the license. There is no Management Agent.		Nothing from D
4	Mortgagor owns building and land, and leases to Operator who holds the license. Management Agent provides services to Operator but doesn't control the license or contract for patient services and is not party to Provider Agreements.		Nothing from D
4a	Mortgagor owns building and land, and leases to Operator. There is also a Management Agent who controls the license, contracts for patient services and/or is party to Provider Agreements.	Both Operator and Management Agent experience is necessary.	All of D

	<u>required for all applicable participants.</u> <u>(http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)</u> <u>OR</u> <u>B. APPS Submittal: APPS Certification (with documentation for signature authority to sign for the entity & if applicable, with documentation for signature authority to sign for other principals with same participation)</u>		
D-4.	Intentionally omitted		<input type="checkbox"/>
D-5.	C. Résumé		<input type="checkbox"/>
	D. Schedule of Facilities Owned, Operated or Managed		<input type="checkbox"/>
D-6.	APPS Certification		<input type="checkbox"/>
D-7.	Management Agent's Consolidated Certification ¹		
D-8.	Credit Report		<input type="checkbox"/>

¹ ~~This consolidated certification is in addition to the form HUD-9839.~~

Supplemental Checklist E: Accounts Receivable Financing			
<i>This supplemental checklist is applicable when the project's accounts receivable are financed. Follow Section 223(f) guidelines for further guidance.</i>			
E-1.	Revolving Loan Note	<input type="checkbox"/>	<input type="checkbox"/>
E-2.	AR Loan Agreement and All Amendments	<input type="checkbox"/>	<input type="checkbox"/>
E-3.	Lessee Security Agreement with FHA Lender	<input type="checkbox"/>	<input type="checkbox"/>
E-4.	UCC-1 Filings and UCC Searches (all)	<input type="checkbox"/>	<input type="checkbox"/>
E-5.	Guarantees (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
E-6.	Intercreditor Agreement (ICA) between A/R Lender and FHA Lender	<input type="checkbox"/>	<input type="checkbox"/>
E-7.	HUD Rider to Intercreditor Agreement	<input type="checkbox"/>	<input type="checkbox"/>
E-8.	Deposit Control Agreement	<input type="checkbox"/>	<input type="checkbox"/>
E-9.	Lock-box Agreement or equivalent control agreement	<input type="checkbox"/>	<input type="checkbox"/>
E-10.	Accounts Receivable Financing Certifications Draft Mortgagor Attorney's Opinion	<input type="checkbox"/>	<input type="checkbox"/>
E-11.	Draft Operator/Lessee Regulatory Security Agreement with AR Lender and Amendments	<input type="checkbox"/>	<input type="checkbox"/>
E-12.	Rider including all required A/R Conditions		<input type="checkbox"/>
E-13.	Accounts Receivable Financing Certifications		<input type="checkbox"/>